Law Office of Willia	Law Office of William Jang, PLLC H-1B Visa/Status Information Sheet (512) 323-2							
		Part A - Prin	cipal Beneficia					
1) Full Name			2) City and Country of Birth 3) City of Last Entry to U.S.					
4) All Other News	lla a d	E) A NI selectification		0) 0 4 1 1 0 4 2 1 1 1 1 1 1 1 1				
4) All Other Names	Usea	5) A Number (if any)		6) Social Security # (if any)				
7) Home Phone	8) Cell Phone	9) Office Phone	10) Fax	11) E-mail]			
7) Home Phone	6) Cell Filone	9) Office Priorite	10) Fax	11) L-mail				
12) Current U.S. Ac	ddress							
,								
13) Foreign Addres	S			14) Desired Co	nsulate			
15) List prior stays in L or H status (if none, write none)			16) Position Being Offered		17) Proposed Wages/Salary			
4) Full Name		formation (if family				C\ \ \ \ \ \ (if any)		
i) Full Name	(maiden name)	2) Relation	3) City & Ci	ountry of Birth	4) SS # (if any)	5) A # (II any)		
		Spouse Child						
		Child Child						
		Child						
		Child Child						
		Child Child						
		Child						
		Part C - Questions to	a Ronoficiary an	d Family				
1) Has anyone serv					on and nature o	f service)		
1) Has anyone served in a military? (if yes, provide, name of military (army, navy), dates location and nature of service).								
2) Has anyone use, sold, provided, or transported any weapons? (if yes, please provide information)								
, , , ,	, , ,		- () ,		,			
3) Has anyone beer	n removed or deporte	ed or had any other in	nmigration proble	ems? (if yes, pleas	e provide inform	nation)		
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4) Has anyone violated the terms of their immigration status or violated any other immigration laws? (if yes, provide details)								
, and a just the second of the								
5) Has an immigrati	ion (green card) appli	cation been filed for	any one? (if yes,	please provide inf	ormation)			
6) Has anyone been arrested, charged, or had dealings with police or had other criminal problems? (if yes provide details)								
7) Has anyone been previously employed in the U.S.? (If yes, please provide information)								
8) Does anyone have or have had any communicable diseases or dangerous physical or mental disorder or drug/alcohol								
8) Does anyone na	ve or have had any co	ommunicable diseas	es or dangerous	physical or mental	alsoraer or aruç	g/aiconoi		
O) Diagon list all pro	viously issued vises	and atatus						
9) Please list all pre	eviously issued visas	and status.						
10) Please list all previously refused visas and status:								
10) Ficase list all pi	Eviously relused visa	io ariu status.						
		Part D - Com	pany Informatio	n				
1) Name of the Con	npany	2) Company Addres	<u> </u>	/11				
., 51 1110 5011		_, company nadios	-					
3) Manager/Officer's Name and Title (contact person) 4) Type of Business								
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5) Company Phone	6) Company Fax	7) Year Established	8) Activity to be	performed by bene	eficiary in U.S.			
-,	-/	,	, , , , , , , , , , , ,	, 22 3, 23	,			
9) Company E-mail	Address	10) Gross Income	11) Net Income	12) Number of En	nployees	13) EIN #		
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Part E - Needed Documents:	Check List				
Beneficiary and Family:					
Copy of I-94 and Passports for all individuals applying					
2. Copy of Government Document proving family relationship (Birth Certificate, Marriage Certificates, etc.)					
Resume (with details of prior experience including job duties)					
Income Tax Documents and other documents evidencing prior experience					
5. University/College Degrees and Transcripts					
6. Licenses and Permits (if job requires such)					
7. Copies of all prior applications and approval notices and denial notices, I-20, etc.					
8. Criminal Documents (if any)					
Information regarding any change of address, phone numbers, etc.					
10. Copy of Prior Employment Authorization Card(s) (if any)					
Petitioning Company:					
11. Certificate & Articles of Formation or of Incorporation (if Petitioner is a corporation or LLC)					
12. Share Certificate or Unit Certificate (if Petitioner is a corporation or LLC)					
13. Partnership Agreement (if Petitioner is a partnership)					
14. Assumed Name Certificate (if any)					
15. Copies of Lease Agreement and Assignment of Lease					
16. Organizational Chart					
17. Pictures of the Business/Office/Factory					
18. Copies of Bank Statements (last three months)					
19. Copies of Employer's Quarterly Reports					
20. Copies of Receipts and Invoices					
21. Copies of Advertisements (if any)					
22. Tax Returns					
23. Latest Company Financial Statements (Income Statement/Balance Sheet)					
24. Business Plan or Company Brochure (if any - three copies)					